

Guidelines 'on the road'

Having spent several years developing and finetuning its *Australian Guidelines for the Treatment of Adults with Acute Stress Disorder and Posttraumatic Stress Disorder*, ACPMH is obviously keen to ensure that the guidelines reach as many stakeholders as possible.

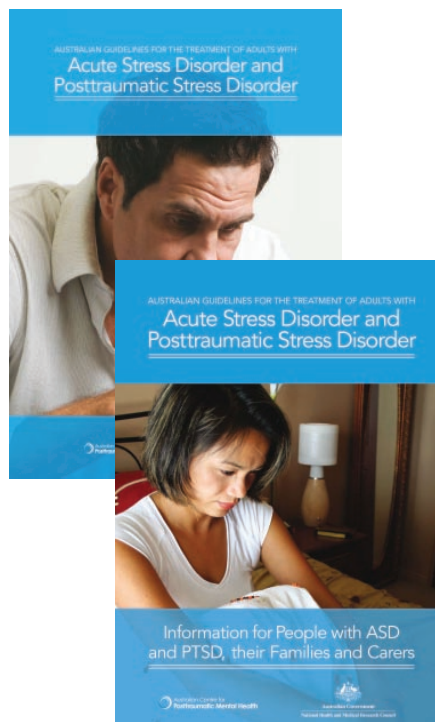
The guidelines have already been condensed into easy-to-follow versions for trauma practitioners and consumers, and now a concise four-page brochure is being developed for GPs and psychiatrists. To ensure that this version meets its key objective of providing the most relevant information in a format and style that suits the target market, a 'road test' of the brochure is being conducted with the financial assistance of the Department of Veterans' Affairs.

The trial involves the placement of the brochure at eight sites, including a range of GP and psychiatric clinics, as well as a large drug and alcohol centre. ACPMH's Bronwyn Wolfgang explains that,

"The main purpose of the trial is to test the brochure for clarity and utility. It's important to ensure that the information that we believe is most critical is readily identifiable and can be acted upon."

The brochure discusses symptoms of trauma, provides basic treatment advice, explains how to conduct a simple screen for ASD and PTSD, and provides a definition of trauma-focussed psychological therapy.

The trial began in March and runs until the end of July. The response from the test sites to date indicates that the brochure has essentially been well thought out and pitches the information at the right level. However, several minor changes are expected to be made before the final version is disseminated in September.



Director's message



One of the key goals of ACPMH is to ensure that our best practice messages reach the widest possible audience. In addition to the clinical algorithm being tested (see article left), I am delighted to report that our NICS scholar, Anne-Laure Couineau, has also been awarded two other research grants to support her work in implementing the guidelines in Veterans and Veterans' Families Counselling Services and sexual assault centres.

I would like to draw your attention to the upcoming Australasian Conference on Traumatic Stress (ACOTS), a collaboration between ACPMH and ASTSS. Keynote speakers include Professors Paula Schnurr (PTSD and physical health) and Joy Osofsky (traumatic stress in children). Taking place in Melbourne in September, further details are available from our website or www.astss.org.au

As I reflect on the past financial year, I just want to recognise the extraordinary hard work that everyone at ACPMH has been in engaged in lately. The last three months have been the most frantic I can recall – with service development, research and training initiatives being undertaken all over the country. These are exciting times for ACPMH (but maybe there'll be a moment for a short breath soon).



Professor Mark Creamer

Putting theory into practice

While conducting research is an essential part of ACPMH's role, making other professionals aware of latest developments and trends is critical.

From 26 May to 6 June, ACPMH ran its Traumatic Stress Syndrome (TSS) course for Australian Defence Force (ADF) psychologists and other mental health practitioners who treat military personnel. The aim of the TSS course is to provide



ACPMH's Andrea Phelps presenting to the TSS course recently

these practitioners with the tools that enable them to identify the signs of posttraumatic stress as early as possible. And while this course has been run for the past decade, it underwent a revamp over the past 12 months, with a particular focus on tailoring the training to the needs of the participants.

In developing the 2008 course, ACPMH was aided by the ADF Directorate of Mental Health. The course was conducted at the Watsonia Barracks and comprised two modules. Designed for frontline health and related practitioners who need to be able to screen for mental health problems, the first module provided short term help with advice on how to refer on if necessary. It was attended by 20 nurses, doctors, psychologists, chaplains and social workers. The second module, a follow-on intended for mental health professionals who provide treatment, was attended by 14 psychologists and social workers who had completed the first module.

According to Pip Weiland, a military psychologist currently seconded to ACPMH, and who helped conduct the course, the participants were excited by their exposure to leading trauma researchers.

"For them, hearing about the latest research directly from esteemed professionals such as Professors Mark Creamer and Sandy MacFarlane [from the University of Adelaide] was an amazing opportunity. Remember, most of these practitioners work on military bases that are, for all intents and purposes, a world away from the cutting edge of trauma research."

One of the most exciting parts of the course, according to the feedback from participants, was interviewing veterans who had been diagnosed with posttraumatic stress disorder. "It gave the participants a chance to put into practice all they were reading and being told," said Pip. "And it gave a face to all the theory and research."

As occurs after each year's TSS course, this one will be reviewed and evaluated to ensure that the 2009 version will provide the most effective outcomes possible.

Making a leap

There's a considerable leap from specialising in youth mental health to helping military personnel adapt from military to civilian life but Dr Darryl Wade doesn't regret his recent professional move.

Darryl is the latest addition to the ACPMH team and he comes to the organisation after more than 15 years as a professional in the public mental health sector. He is a clinical psychologist with experience in clinical, management, research, training and consulting roles. Among the organisations that Darryl has worked for are the Early Psychosis Prevention and Intervention Centre (EPPIC), EPPIC Statewide at ORYGEN Youth Health, and Headspace, the National Youth Mental Health Foundation.

Why the move? According to Darryl, "I just felt that I was ready for new challenges. My role at ACPMH is very hands-on, which I was really keen on. There's a big focus on service development and I'm enjoying it immensely."

Darryl's main role at ACPMH is as a project manager with one of the Australian Government Lifecycle Initiatives. The initiative he is managing is based in Townsville and is focussed on helping military personnel with mental health problems make a successful transition from military life to the civilian world.

"There are obviously great challenges in this area at the moment," says Darryl, "because of Australia's involvement in major conflicts in Iraq, Afghanistan and East Timor. But providing the best possible care and support for defence members and their families is crucial and it's rewarding to be involved in these endeavours."

Darryl's escape from work revolves around his young family, particularly getting out of Melbourne and 'roughing it' for a weekend – which is a great example for someone teaching others how to achieve the right work-family balance.

Promoting recovery



Not everyone who suffers a traumatic injury requires treatment for posttraumatic stress disorder (PTSD) or trauma-related psychopathology.

But for those who do, early intervention can play a crucial role in their recovery. ACPMH's Dr Meaghan O'Donnell is leading a research project that aims to identify patients in hospital who require early psychological intervention to help them recover from traumatic injury.

Dr O'Donnell hopes that her research will save time and money in the future by identifying, as early as possible, those patients who require mental health treatment. **"Most patients don't have problems and won't have problems. We want to exclude those people and focus on the still significant proportion – about 25% – who will require treatment."**

The Promoting Recovery Study began in October 2007 and is being conducted with patients from the Alfred and Royal Melbourne Hospitals. The first step involves screening patients to identify those vulnerable to poor psychological recovery after injury. Meaghan explains that "the screening process takes place just before the patients are being discharged. We've developed a screening index that helps us identify who may have psychological problems later on."

Once patients have been screened, those deemed "at low risk" of developing PTSD or depression receive follow up consultations in six and 12 months' time to ascertain whether or not the initial screen was accurate. Those deemed "at risk" receive further screening at one month post injury. If they are showing symptoms of poor mental health, they are invited to participate in the intervention component of the study. The intervention components are either early psychological intervention (EI) or treatment as usual (TU).

One of the main focuses of the study is to identify barriers to care – that is, what stops people who need psychological therapy from receiving it. Among the barriers already identified are geography, particularly for those living in rural and remote areas, and the "I'll be right" attitude of many male patients.

As of mid-2008, about 600 people had been screened and about 50 people have entered the clinical intervention. Everyone will have completed their therapy by October 2008 and will receive follow-up 12 months later. Their experiences may well play a major role in ensuring others receive early and appropriate treatment for PTSD and depression symptoms following traumatic injuries.

Increasing understanding

Recent publications

Forbes, D., Parslow, R., Creamer, M., Allen, N., McHugh, T., & Hopwood, M. (2008). Mechanisms of anger and treatment outcome in combat veterans with Posttraumatic Stress Disorder. *Journal of Traumatic Stress*, 21(2), 142-149.

This study examined factors influencing the relationship between anger and outcome to improve treatment effectiveness among military veterans with posttraumatic stress disorder (PTSD). Participants comprised 103 veterans attending PTSD treatment. Measures of PTSD and comorbidity were obtained at intake and 9-month follow-up.

O'Donnell, M. L., Bryant, R. A., Creamer, M., & Carty, J. (2008). Mental health following traumatic injury: Toward a health system model of early psychological intervention. *Clinical Psychology Review*, 28, 387-406.

The frequency with which severe injury occurs renders it a leading cause of posttraumatic stress disorder and other trauma-related psychopathology. In order to develop a health system model of early psychological intervention for this population, we review the literature that pertains to mental health early intervention. Recommendations are made to facilitate tailoring early intervention psychological therapies to the special needs of the injury population.

Recent and upcoming presentations

- In April, Professor Mark Creamer gave an invited address to the annual conference of the Repatriation Medical Authority (RMA) in Canberra on the long term mental health effects of trauma. That month, he also gave a keynote address to the National Anxiety and Depression Conference in Melbourne on "Recent Advances in the Treatment of Traumatic Stress".
- Professor Creamer and Associate Professor David Forbes were invited speakers at the Victorian Magistrates Conference, talking about mental health following violent crime.
- At the end of April Associate Professor John Pead presented a speech to the Safety In Action Conference held by WorkSafe Victoria on the risks to mental health following professional counselling and debriefing after a workplace death or life-threatening accident.

Work with us to reduce the effects of trauma

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Australian Centre for Posttraumatic Mental Health Inc
ABRN: 095 202 994

US scholar awarded Fulbright Scholarship to study at ACPMH

ACPMH will be hosting an American PhD student from the University of Utah from August this year while she carries out research that is pertinent to both the Australian and the United States military experience.

Lynnette Averill's research is on Posttraumatic Stress Disorder (PTSD) and Alcohol Use in Australian Military Veterans and she has been granted a Fulbright Scholarship to study in Australia.

[Being at ACPMH will enable her to utilise latent growth mixture modelling to examine the trajectory of change and relationship between PTSD and alcohol use in Australian military veterans following treatment.](#)

The research will test various models of interaction between PTSD and alcohol use in order to discern the bi-directional influences between these two phenomena over time.

Lynnette's research is particularly pertinent at the moment. As she explains, "a significant percentage of homeless across the world are veterans and this number is continuing to increase as veterans are returning from Iraq. Many of their problems are related to PTSD and substance use. This work will increase our collective understanding of the relationship between substance use and PTSD and provide an opportunity to make substantial advancements in treatment protocols for intervention and prevention strategies among individuals with PTSD".

Lynnette's interest in PTSD stems from her father, a Marine Corps veteran of the Vietnam War who was diagnosed with the disorder, and took his own life as a result when she was a child.

The Australian-American Fulbright Commission and Program was established in 1949 through the first treaty ever signed between Australia and the US and is funded by both governments and a select group of sponsors.



Increasing understanding

Recent and upcoming presentations continued

- In May, leading trauma experts Professors Mark Creamer and Sandy McFarlane, Associate Professors David Forbes and John Pead, and Andrea Phelps conducted Information Sessions on the Australian Guidelines for the Treatment of Adults with Acute Stress Disorder and Posttraumatic Stress Disorder for practitioners and the community in Alice Springs, Darwin and Townsville.
- A new veteran mental health resource developed in consultation with ACPMH and endorsed by the National Veterans' Health and Wellbeing Forum was launched in early May by the Minister for Veterans' Affairs, the Hon. Alan Griffin. Professor Mark Creamer attended the launch of the At Ease initiative at Parliament House in Canberra.
- Also in May, Anne-Laure Couineau and Andrea Phelps conducted a 2 day trauma-focused training workshop in Adelaide. Held at Repatriation General Hospital in Daw Park, this training was well attended by psychiatrists, psychologists, mental health nurses and other health practitioners seeking to supplement their knowledge.
- The NSW Motor Accidents Authority, supported by ACPMH, hosted a mental health forum for compulsory third party and workers' compensation regulators in Sydney in late May in which Associate Professor John Pead discussed the impact of mental health issues following an accident.
- From 26 May to 6 June 2007, ACPMH conducted the Traumatic Stress Studies course on behalf of the Australian Defence Force in Melbourne (for further information, see page 2).
- In June, Professor Mark Creamer attended the two-day Board of Directors meeting of the International Society for Traumatic Stress Studies (ISTSS) in London. Whilst there, he also attended a one-day International Symposium on Interventions for Traumatized Populations.